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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing      OR      ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

**Attorney Docket Number** 60130-1874; 03MRA0392

**First Named Inventor** Yue, Stephen

**COMPLETE IF KNOWN**

**Application Number** /

**Filing Date** Herewith

**Group Art Unit**

**Examiner Name**

**As a below named inventor, I hereby declare that:**

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**THERMAL SPRAY REINFORCEMENT OF A STABILIZER BAR**

*(Title of the Invention)*

the specification of which

☐ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) /

as United States Application Number or PCT International

Application Number /

and was amended on (MM/DD/YYYY) /

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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## DECLARATION — Utility or Design Patent Application

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Name William S. Gottschalk

Address 400 W. Maple Road

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State Michigan

ZIP 48009

Country United States

Telephone (248) 988-8360

Fax (248) 988-8363

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR :

☐ A petition has been filed for this unsigned inventor

Given Name Stephen  
(first and middle [if any])

Family Name YUE  
or Surname

Inventor's  
Signature

*[Signature]*

Date

12/17/03

Residence: City Montreal

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City Montreal

State Quebec

ZIP H4A 3H3

Country Canada

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(first and middle [if any])

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or Surname

Inventor's  
Signature

Date

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Country U.S.

Citizenship USA

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City Lake Orion

State MI

ZIP 48362

Country US

☒ Additional inventors are being named on the \_\_\_\_\_ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

**DECLARATION — Utility or Design Patent Application**

Direct all correspondence to:

Customer Number  
or Bar Code Label

026096

OR ☐

Correspondence address below

Name

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(248) 988-8363

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR :

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any])

Stephen

Family Name  
or Surname

YUE

Inventor's  
Signature

Date

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Country

Canada

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☐ A petition has been filed for this unsigned inventor

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(first and middle [if any])

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Family Name

or Surname

KLECKNER

Inventor's  
Signature*Mark A. Kleckner*

Date

1/5/04

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48362

Country

US

☒ Additional inventors are being named on the \_\_\_\_\_ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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# DECLARATION

## ADDITIONAL INVENTOR(S)

Supplemental Sheet

Page 1 of 3

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Maurice A.

~~RICHARD~~ Bechard *MB.*

Inventor's  
Signature

*Maurie Bechard*

Date

*Dec. 12/03*

Residence: City Tupperville

State Ontario

Country Canada

Citizenship Canada

Mailing Address 10 Victoria Street

Mailing Address

City Tupperville

State Ontario

ZIP NOP 2M0

Country Canada

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Joseph A.

FADER

Inventor's  
Signature

Date

Residence: City Brighton

State MI

Country US

Citizenship USA

Mailing Address 6812 Rink

Mailing Address

City Brighton

State MI

ZIP 48114

Country US

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Luiz G.

LOPES, Jr.

Inventor's  
Signature

Date

Residence: City Troy

State MI

Country US

Citizenship Brazil

Mailing Address 2040 Somerset Blvd., Apt. 202

Mailing Address

City Troy

State MI

ZIP 48084

Country US

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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> <b>Supplemental Sheet</b> Page <u>1</u> of <u>3</u>
--------------------	---

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Maurice A.		BICHARD	
Inventor's Signature		Date	
Residence: City Tupperville	State Ontario	Country Canada	Citizenship Canada
Mailing Address 10 Victoria Street			
Mailing Address			
City Tupperville	State Ontario	ZIP NOP 2M0	Country Canada
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Joseph A.		FADER	
Inventor's Signature <i>Joseph A. Fader</i>		Date <i>12/27/03</i>	
Residence: City Brighton	State MI	Country US	Citizenship USA
Mailing Address 6812 Rink			
Mailing Address			
City Brighton	State MI	ZIP 48114	Country US
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Luiz G.		LOPES, Jr.	
Inventor's Signature		Date	
Residence: City Troy	State MI	Country US	Citizenship Brazil
Mailing Address 2040 Somerset Blvd., Apt. 202			
Mailing Address			
City Troy	State MI	ZIP 48084	Country US

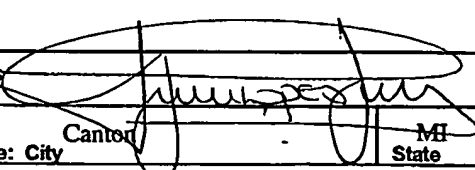
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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> <b>Supplemental Sheet</b> Page <u>1</u> of <u>3</u>
--------------------	---

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Maurice A.		BICHARD	
Inventor's Signature		Date	
Residence: City Tupperville	State Ontario	Country Canada	Citizenship Canada
Mailing Address 10 Victoria Street			
Mailing Address			
City Tupperville	State Ontario	ZIP N0P 2M0	Country Canada
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Joseph A.		FADER	
Inventor's Signature		Date	
Residence: City Brighton	State MI	Country US	Citizenship USA
Mailing Address 6812 Rink			
Mailing Address			
City Brighton	State MI	ZIP 48114	Country US
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Luiz G.		LOPES, Jr.	
Inventor's Signature 		Date	
Residence: City Canton	State MI	Country US	Citizenship Brazil
Mailing Address 42238 Saratoga Circle			
Mailing Address			
City Canton	State MI	ZIP 48187	Country US

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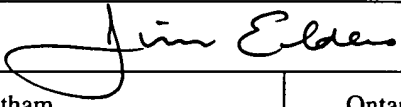
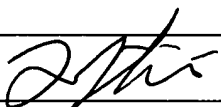
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**ADDITIONAL INVENTOR(S)**  
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<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
William J.		ELDERS	
Inventor's Signature 		Date <u>12-12-03</u>	
Residence: City Chatham	State Ontario	Country Canada	Citizenship Canada
Mailing Address 116 Sylvester Drive			
Mailing Address			
City Chatham	State Ontario	ZIP N7M 5P4	Country Canada
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Timothy J.		SOWINSKI	
Inventor's Signature 		Date <u>12/12/03</u>	
Residence: City Chatham	State Ontario	Country Canada	Citizenship Canada
Mailing Address 25 Taylor Avenue			
Mailing Address			
City Chatham	State Ontario	ZIP N7L 2T4	Country Canada
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Leo		MEDEIRES	
Inventor's Signature		Date	
Residence: City Guelph	State Ontario	Country Canada	Citizenship Canada
Mailing Address 19 Hales Crest			
Mailing Address			
City Guelph	State Ontario	ZIP N1G 1P4	Country Canada

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Given Name (first and middle, if any)	Family Name or Surname		
William J	ELDERS		
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Chatham	Ontario	Canada	Canada
Mailing Address: 116 Sylvester Drive			
Mailing Address:			
City	State	Zip	Country
Chatham	Ontario	N7M 5P4	Canada
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle, if any)	Family Name or Surname		
Timothy J.	SOWINSKI		
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Chatham	Ontario	Canada	Canada
Mailing Address: 25 Taylor Avenue			
Mailing Address:			
City	State	Zip	Country
Chatham	Ontario	N7L 2T4	Canada
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle, if any)	Family Name or Surname		
Leo	MEDEIROS		
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Guelph	Ontario	Canada	Canada
Mailing Address: 19 Hales Crescent			
Mailing Address:			
City	State	Zip	Country
Guelph	Ontario	N1G 1P4	Canada

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## DECLARATION

**ADDITIONAL INVENTOR(S)**  
Supplemental Sheet  
Page 3 of 3

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Pete N.		KIOUSIS	
Inventor's Signature <i>Pete N. Kiousis</i>		Date <i>10/15/03</i>	
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Mailing Address <i>1594 Sheffield</i>			
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City <i>Birmingham</i>	State <i>MI</i>	ZIP <i>48009</i>	Country <i>US</i>
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

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